# BUDGET SUMMARY, BUDGET NARRATIVE, AND SERVICE CONTRACT SUMMARY

| APPLICANT LEA: |  |                         | COUNTY :                 |                           |  |
|----------------|--|-------------------------|--------------------------|---------------------------|--|
| CONT           | ACT FOR THIS FORM:   | 1                       | TELEPHONE: ()            |                           |  |
|                |  | BUDGET SUMMAR           | <u>Y</u>                 |                           |  |
| THIS B         | SUDGET SUMMARY IS PROPOSED FOR: (C/                        | heck only one)          |                          |                           |  |
| □ Stud         | lent Support Services (EC § 54749)                         | □ Child Care/Developme  | nt Services (EC § 54749) | ■ Non-converting COE (EC  |  |
| § 2551.3       |  |                         |                          |                           |  |
| •              | S Resource Code 6091)(Includes COE<br>contained classroom) | (SACS Resource Code 609 | 02)                      | (SACS Resource Code 6093) |  |
| LINE           | PROJECTED REVENUES FO                                      | OR FY 2004-05           | CAL-SAFE PROGRAM         | OTHER FUNDING: (Identify) |  |
| #              |  |                         | FUNDING                  |                           |  |
| 1              | Estimated funds unspent from FY 2003-04                    |                         | \$                       | \$                        |  |
| 2              | Estimated earnings for FY 2004-05                          |                         | \$                       | \$                        |  |

| #  | PROJECTED REVENUES FOR FY 2004-05  | FUNDING | OTHER FUNDING: (Identity) |
|----|--|---------|---------------------------|
| 1  | Estimated funds unspent from FY 2003-04  | \$      | \$                        |
| 2  | Estimated earnings for FY 2004-05  | \$      | \$                        |
| 3  | Projected Total Available Revenue for FY 2004-05 (Sum of lines 1 & 2)                    | \$      | \$                        |
|    | PROJECTED EXPENDITURES FOR FY 2004-05  | AMOUN   | T BUDGETED                |
| 4  | 1000-1999 Certificated Salaries  | \$      | \$                        |
| 5  | 2000-2999 Classified Salaries  | \$      | \$                        |
| 6  | 3000-3999 Employee Benefits  | \$      | \$                        |
| 7  | 4000-4999 Materials, Books, and Supplies   | \$      | \$                        |
| 8  | 5000-5999 Services and other Operating Expenditures                                      | \$      | \$                        |
| 9  | Sub-total of Direct Costs (Sum of lines 4-8)   | \$      | \$                        |
| 10 | 7000 Indirect Costs at%  | \$      | \$                        |
| 11 | 6000-6599 Capital Outlay   | \$      | \$                        |
| 12 | Total of Projected Expenditures for FY 2004-05 (Sum of lines 9-11)                       | \$      | \$                        |
| 13 | Estimated unspent funds from FY 2004-05  | \$      | \$                        |
| 14 | Total of expenditures & unspent funds (Sum of lines 12 & 13) (Should agree with line 3.) | \$      | \$                        |

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### **BUDGET NARRATIVE**

| THIS BUDGET NARRATIVE IS FOR: (Check only one) |   |                                    |  |  |
|--|---|------------------------------------|--|--|
| ☐ Student Support Services (EC § 54749)        | □ Child Care and Development Services<br>(EC § 54749) | ■ Non-Converting COE (EC § 2551.3) |  |  |

| LINE<br># | OBJECT<br>CODE | BUDGET NARRATIVE FOR EACH LINE ITEM DESCRIPTION (See Instructions) | CAL-SAFE<br>FUNDING | OTHER FUNDING |
|-----------|----------------|--|---------------------|---------------|
|           |                |  |                     |               |
|           |                |  |                     |               |
|           |                |  |                     |               |
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## COMPLETE THIS FORM ONLY IF APPLICANT AGENCY CONTRACTS FOR SERVICES FOR CAL-SAFE PROGRAM STUDENTS AND/OR CHILDREN.

#### **SERVICE CONTRACT SUMMARY**

| CONTRACTED SERVICES LISTED BELOW ARE FUNDED BY THE BUDGET INDICATED: (Check only one) |  |                                    |  |  |  |
|---|--|------------------------------------|--|--|--|
| ☐ Student Support Services (EC § 54749)   | ☐ Child Care and Development Services (EC § 54749) | □ Non-Converting COE (EC § 2551.3) |  |  |  |

| DATE<br>CONTRACT<br>BEGAN | NAME OF CONTRACTING AGENCY | CONTRACT<br>AMOUNT | SERVICES TO BE CONTRACTED |
|---------------------------|----------------------------|--------------------|---------------------------|
|                           |                            |                    |                           |
|                           |                            |                    |                           |
|                           |                            |                    |                           |
|                           |                            |                    |                           |
|                           |                            |                    |                           |
|                           |                            |                    |                           |
|                           |                            |                    |                           |

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# <u>DIRECTIONS FOR COMPLETING FORM J: BUDGET SUMMARY,</u> <u>BUDGET NARRATIVE, AND SERVICE CONTRACT SUMMARY</u>

#### **BUDGET SUMMARY (Page 1 of 3)**

Duplicate the Budget Summary page and prepare a *separate* budget proposal for (1) student support services and (2) child care and development services. County offices of education (COEs) funding the Cal-SAFE Program pursuant to EC § 2551.3 must complete a budget for Nonconverting COE as well as one each for student support services and child care and development services provided over their cap. Refer to Attachment 4 for a sample Budget Summary.

#### DIRECTIONS FOR COMPLETING FORM:

**Applicant LEA:** Write the name of the LEA as it appears on the cover page of the Cal-SAFE Program continued funding application.

**County**: Write the name of county in which the applicant LEA is located.

**Contact for this Form**: Write the name of the person who can answer questions on the proposed budget.

**Telephone:** Write the telephone number, including area code, of the contact person.

Proposed Budget: Check in the box provided to identify the budget.

**Cal-SAFE Program Funding:** Column is for projected revenue and expenditures (lines 1-14 of this form) ONLY for the Cal-SAFE Program.

**Other Funding**: Identify the resource, funding level, and expenditures from other resources (e.g., Proposition 10, Child Care Food Program) providing services to Cal-SAFE Program students and children in this column. Also, complete as appropriate, for lines 1-14 on this form.

**Line 1:** Estimate the amount of unspent Cal-SAFE Program funding from FY 2003-04 for the specific budget. For example, if there is \$5,000 unspent from the student support services budget, it can be listed only on the student support services budget. It cannot be used for child care.

**Line 2:** Enter the projected total earnings calculated on Form J-1 or J-2 for student services and child care. Non-converting counties will use earnings projected on Form J-3.

**Line 3:** The sum of lines 1 and 2 is the *projected* total revenue for FY 2004-05 for the specific budget.

**Line 4:** Enter the amount budgeted for all 1000 object codes including salaries of certificated staff funded out of the respective budget. Local policy determines whether child care teachers are certificated or classified employees.

**Line 5:** Enter the amount budgeted for all 2000 object codes including salaries of classified staff funded out of the respective budget.

**Line 6:** Enter the amount budgeted for 3000 object codes for the respective budget. Benefit costs charged to this program must be proportionate to the percentage of salary charged to this program.

**Line 7:** Enter the amount budgeted for 4000 object codes which may include the purchase of books, instructional materials and supplies, transportation supplies, and food service supplies directly related to the Cal-SAFE Program.

**Line 8:** Enter the amount budgeted for all 5000 object codes. Expenses may include rent/lease, utilities, travel, conferences, contracted services, and other operating expenses.

Line 9: This total is the direct costs, excluding capital outlay.

**Line 10:** Enter the amount budgeted for indirect costs for FY 2004-05. Consistent with statute, indirect cost rate cannot exceed the lesser of the CDE-approved indirect cost rate or 10 percent. Indirect costs are to be charged against direct costs only (line 9). Contact your business office to verify the current CDE-approved indirect cost rate.

**Line 11:** Enter the amount budgeted for all 6000 object codes including site improvement and equipment replacement.

Line 12: This total is the projected actual expenditures for FY 2004-05.

**Line 13:** Estimate the amount of unexpended Cal-SAFE Program funds from FY 2004-05, if any.

**Line 14**: This total is the sum of projected expenditures and estimated unexpended funds from FY 2004-05. It should agree with total in line 3.

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#### **BUDGET NARRATIVE (Page 2 of 3):**

The Budget Detail page provides information on the proposed expenditures as listed on the Budget Summary page. Duplicate this Budget Detail page as many times as needed and follow the instructions to complete this form. Prepare a separate Budget Narrative for each Budget Summary and attach to the respective Budget Summary. Refer to Attachment 4 for a sample Budget Detail.

#### DIRECTIONS FOR COMPLETING FORM:

- 1. Prepare a Budget Narrative for each budget.
- 2. Indicate a line number/object code for each sub-category.
- 3. Include full time equivalent (FTE), number of days or percent of time, and indicate duties/services to be performed for all personnel. For partial salary expenses, indicate the percentage of salary costs charged to the Cal-SAFE Program. Each person must be funded out of the respective budget contingent upon the services performed. The cost for a staff person with responsibilities allowable for both the student services and child care budgets may be pro-rated proportionately to both budgets. For example, the cost of a nurse working part of the day with students and an equal amount of time with their children may be charged 50% to each budget. If only 25% of the time is with the children, only that amount may be charged to the child care budget.
- 4. Identify expenditure amounts separately for each object code, indicating the purpose of the expense, e.g., instructional materials, office supplies, printing, travel, nutritional meal supplements, travel, equipment, and so forth. Clarify how cost is calculated if necessary. For example: Office supplies @\$25 per month X 10 sites X 10 months = \$2,500.
- 5. Identify costs for PERS Reduction separately, if applicable

#### **SERVICE CONTRACT SUMMARY (Page 3 of 3):**

Statute provides for the applicant agency to "enter into *formal* partnership agreements, as necessary, with community-based organizations and other governmental agencies to assist pupils in accessing support services." (EC § 54745(b)(10)). An agency that chooses to contract services does not need to submit the language to CDE for prior approval. Expenditures that represent contract payments to a contractor for Cal-SAFE Program services must be included in the Cal-SAFE program account. (EC § 54749(f)). The applicant agency is responsible for assuring that the contractor uses the funding consistent with statute. **Prepare a separate Service Contract Summary for each Budget Summary and <u>attach to the respective Budget Summary.</u> Refer to Attachment 4 for a sample Service Contract Summary.** 

#### DIRECTIONS FOR COMPLETING FORM:

- 1. Complete this form *only* if services are contracted.
- 2. Prepare a contract summary for each budget from which contract(s) will be funded and check in the box provided to identify the budget.
- 3. List all contractors funded by Cal-SAFE Program funding in Object Code 5000 in each specific budget. *Include the name of the individual/agency, projected level of funding, and brief description of contracted services expenditures.*
- 4. Write the date when each contract was initiated. If it is new for FY 2004-05, write the estimated date of operation in the cell.

**NOTE**: For assistance in completing this form, contact your agency business office or the California School Accounting Manual (CSAM). The Cal-SAFE Program webpage (www.cde.ca.gov/ls/cg/pp/) has a link to the CSAM. Section 401 provides an explanation on expenditures appropriate for each revenue object code.